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ABSTRACT

The experiences of adult educators in Massachusetts who have integrated a health unit into adult literacy classes were examined in an exploratory study. Over a 5-year period, 31 adult learning centers in Massachusetts received funding to incorporate health topics into their adult literacy curriculum. A total of 31 teachers from 24 of the sites were interviewed about their health projects. More than half of the projects were integrated into programs of adult basic education or English for speakers of other languages. Most classes spent approximately 4 hours each week on their health project. Seven teachers reported having conducted health projects in their literacy classes during each of the past 4 years. Most participants were women. Twenty-six teachers addressed health topics in activities incorporated into the regular class structure. In some cases, projects were implemented by small circles of learners who worked separately from the class. In a few classes, both methods were used. Project activities included the following: using videotapes or computers; creating "products" such as cookbooks, health brochures, or health resource directories; role playing; and delivering presentations to the class, school, or wider community. Overall, the teachers credited their health projects with enhancing students' literacy skills, motivation, confidence, self-esteem, and empowerment. (MN)

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NCSALL

National Center for the Study of Adult Learning and Literacy

"INTEGRATING HEALTH AND LITERACY: ADULT EDUCATORS' EXPERIENCES"

by

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and Katharine Daube, Sc.M.
Harvard School of Public Health**

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NCSALL Reports #5
August 1998

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Executive Summary

This exploratory study addresses the experience of adult educators in Massachusetts who have integrated a health unit into adult education classes focused on reading, writing, and communication skill development. Health as a topic area may serve to motivate learners and support critical skill development and, at the same time, offer a venue in which health issues and information can be presented, discussed, and critically analyzed. Such integration of health and literacy must assume that the introduction of health topics into adult learning classes would support existing curricula goals. However, no systematic studies of health projects in adult education programs have been conducted. This study focuses on the teachers' perceptions of advantages and disadvantages of a focus on health.

The participating teachers indicate that health units helped them meet classroom objectives and supported the teaching of reading, writing, vocabulary building, and speaking skills. Teachers note that they value health as a subject of study because of its relevance to learners' lives and that their learners were interested and motivated to read or write on health issues and speak in class or in groups about the subject. Many teachers noted outcomes outside of the classroom as well and highlighted increased activity within the community and reports of learners taking healthful action for themselves.

The findings from this study have implications for program designers and practitioners in the fields of education and public health.

Integrating Health and Literacy: Adult Educators' Experiences

Introduction

This exploratory study focuses on the experience of adult educators who have incorporated health projects into the classroom activities at adult learning centers. The more than 2,800 adult learning centers across the United States serve between 2.6 and 3.2 million adults per year. In 1992, adult learning centers served nearly 178,000 disabled adults, 1.2 million immigrants, 1.2 million unemployed adults, more than 469,000 welfare recipients, 297,000 incarcerated adults, and 41,500 homeless adults (Young et al., 1994). Health educators have begun to recognize the importance of such centers as a mechanism to reach what has been described as "hard to reach" population groups in need of health information and services and at risk for poor health outcomes. At the same time, adult educators recognize that health is an issue of critical importance to adult students and that their interest in the subject may help provide motivation for learning skills.

The long time frame offered within a school environment and the intimate dialogue encouraged by the classroom structure can build on existing knowledge, be attentive to cultural differences, and address the barriers of language, lack of experience, poverty, fear, and shame. Adult education programs could provide health educators with a venue in which critical health issues and information can be presented, discussed, and critically analyzed. Health educators could provide adult education programs with up to date information, appropriately developed materials, and insight into health issues of major concern to people's lives.

Such work, however, must assume that the introduction of health topics into adult learning classes would support existing curricula goals. Development work in this area must be attentive to the needs of teachers in meeting their curriculum responsibilities. Consequently, health projects need to be assessed, in part, for their value to lessons focused on reading, writing, oral expression, and math skills, from the educators' perspectives. To date, no systematic studies of health projects in adult education programs have been conducted. This exploratory study examines the experience of a selection of adult educators in Massachusetts who have integrated a health unit into adult education classes focused on reading, writing, and communication skill development. Findings from this study can be useful to adult educators interested in incorporating health projects into the classroom as well as to public health educators interested in exploring innovative health education programs and settings.

Background

Education, long used as a marker of social class, has links to health status. As is noted in *Healthy People 2000*, education is a key determinant of access to health services and to health promotion activities. Those living in poverty have limited access to health promotion and disease prevention programs and to curative services, often face greater environmental and occupational exposures, and encounter educational, housing, and employment opportunities that are limited or substandard (U.S. DHHS).

The National Adult Literacy Survey (NALS) released in 1993 has refocused attention on adult illiteracy (Kirsch et al. 1993). Among the many effects of the release of the NALS study has been a growing interest in the relationship between literacy and a variety of health related issues (Weiss et al. 1992; Davis et al. 1996; Parker et al. 1995; Baker et al. 1997; Williams et al. 1998, Rudd & Colton, 1998). The adult education system, with its reach to those in poor and minority communities, offers opportunities for public health education.

The Commonwealth Experience

Starting in 1993, the Commonwealth of Massachusetts made a portion of tobacco tax revenue available to community-based adult education programs interested in addressing health topics in classroom activities. All funded programs were mandated to develop health related curricula through a participatory process involving adult learners and teachers (Rudd & Waldron, 1995). At the same time, a model program called Health Education in Adult Literacy (HEAL) was introduced by a private non-profit agency and supported by the Centers for Disease Control. With a focus on breast and cervical cancer education, HEAL blended participatory methodology with an integrated health and literacy approach in adult literacy centers within Massachusetts and other states. Teachers and students from a wide variety of adult education classrooms throughout Massachusetts developed innovative materials and activities linked to either or both of these initiatives.

Study Methods

Over five years, thirty-one adult learning centers in Massachusetts received funding from either the tobacco tax monies or from the HEAL project. Telephone contact was made with staff at these thirty-one centers and twenty-four of these centers agreed to participate in the study. The majority of the programs declining were closed for the summer or reported that their teachers could not be

reached until the fall. Several centers had more than one teacher interested in participating and, as a result, a total of thirty one teachers from twenty four sites were interviewed. Most interviews were conducted in person at the adult education centers and took approximately one hour to complete. All interviews were conducted by two public health graduate students between June 1997 and October 1997.

Each teacher was asked about her/his experience with incorporating health topics into the adult literacy curriculum. The questionnaire included open-ended questions about the health projects, the reasons for incorporating a health focus, and characteristics of the classroom setting. The outcome of the health project, for both adult learners and the teacher, was also a focus of inquiry. Additional open-ended questions solicited information about the perceived value of health as a classroom topic. Responses were recorded and analyzed for repetitive patterns and thematic groupings.

Teachers were asked to consider a variety of literacy related curriculum objectives and rate the usefulness of the health project in terms of these specific objectives. Mean scores were calculated for these queries. These initial findings were then mailed back to participants who were asked to comment on findings. The authors considered the feedback in the preparation of this report.

Findings

While health projects took place in many types and levels of classes, over half of the classes were adult basic education classes (ABE) or English for speakers of other languages classes (ESOL). Most commonly, the classes were at beginning levels or consisted of students with mixed abilities. This was particularly true of ESOL classes. The number of adult learners involved in these programs ranged from a small group of four or five participants to a full class of thirty to forty.

Most classes spent about four hours or less per week on the health project over a one year period. Some health projects (6 of 31) devoted more class time, and in one case, the health project was the primary classroom activity. Almost one-quarter of teachers (7 of 31) reported having had conducted health projects in their classes each year for the past four years.

Class participants were predominately women. Overall, across all programs, the ages of learners ranged from eighteen to sixty years old. These classrooms had a diverse representation of languages other than English, most commonly Spanish, Haitian Creole, Portuguese, Vietnamese and Chinese. Other

languages such as Polish, Arabic and Russian were also represented.

Decision to Focus on Health Topics

Most teachers noted that their decision to conduct a health project was influenced by the adult learners and by the availability of funding. Teachers reported that they had hoped to increase awareness of health issues and motivate behavior change as well as increase skills in reading and writing. Some teachers offered reasons connected to the health care system such as helping learners connect to local agencies, increase their ability to interact with doctors, and hone decision making skills. Others focused on helping their students talk to one another, work collaboratively, and take action through research and materials development. About half of the teachers (15 of 31) noted that the adult learners in their class decided to participate in a health project because it was of interest to them and helped meet their own needs. One-third of the teachers (10 of 31) reported that they played the key role in initiating the health project.

Almost all teachers (27 of 31) reported that the topic of the health project was chosen because of the adult learners' needs or interest in a particular area. Class surveys, needs assessments, and group discussions were the methods used to select a topic. On average, each class addressed about five health topics. Although the tobacco tax grant did not mandate it, anti-tobacco projects were the most frequently reported subject area. Nutrition, HIV/AIDS, substance use, cancer prevention, stress management, accessing the health care system and parenting skills were also the topics of many projects.

Teaching and Learning Methods

Most teachers (26 of 31) reported that health topics were addressed in activities incorporated into the regular class structure. In some cases, the project was implemented by a small circle of learners, separate from the class, working together on group identified health topics. In a few cases, the class formed both a health team and integrated health into the regular class curriculum.

The contract of the tobacco tax grant encouraged teachers to collaborate with outside organizations and required that programs incorporate participatory teaching methods. All of the surveyed teachers reported that they worked with community-based organizations such as health centers, social service agencies and public schools. Most commonly, practitioners from organizations came to speak to the class on various health issues. In some cases, adult learners also visited these organizations and, in a few cases, were able to use some of their resources such as computer facilities. In almost all cases, the teachers felt that collaboration

with other organizations was a helpful experience and added to the learning process.

Teachers also noted that the health projects involved hands-on activities and the use of technology, such as videos or computers. In one example, the class participated in a "health chat line" on the Internet. A few other teachers reported that the health projects led the adult learners out of the classrooms and into the community. One teacher reported that, unlike other topics, the health project involved more group activities.

Focus on Skills

Half of the teachers (16 of 31) reported that their students created a "product" such as a cookbook, health pamphlet/brochure or health resource directory. Each of these activities involved skill building in reading, writing, research, and speaking. Lessons in reading and writing were also a focus in activities such as learner autobiographies and, in one case, a photonovella. Half of the teachers noted that they emphasized group discussion; this was a main skill building activity in many ESOL classes. Role play, especially in the context of doctors' visits, also provided an exercise in English language development. About one-third of the teachers (10 of 31) reported that learners delivered presentations on health topics to the class, school, or wider community.

Teachers were asked to consider several academic areas that might be addressed during the course of any class project and rate the extent to which the health project allowed them to concentrate on these areas. As **Table 1** illustrates, teachers offered high ratings for vocabulary, reading, critical thinking, dialogue and discussion, and English language speaking and listening skills. Other areas, such as note taking, story writing, essay writing, presentation skills, research skills, and interview skills were also addressed in the health projects; however, mid-range and lower scores for these items indicate that teachers did not as consistently incorporate these skill areas in their projects.

Outcomes for Teachers and Students

Teachers were also asked to comment on what they saw as outcomes of the project. For many teachers, the health project provided an opportunity to act as a facilitator and work within the participatory model of education. A few others (3 of 31) reported that the project helped build classroom materials such as a health library or health curriculum that could be used for other classrooms or future projects.

Many teachers highlighted outcomes linked to their relationship with the adult learners. For about one-fourth of teachers (8 of 31), developing more personal and trusting relationships with the students was the major outcome. One teacher highlighted the greater understanding of how health issues affected learners and another underscored the value of learning from the students.

More than half of the teachers focused on outcomes linked to student motivation, confidence, self-esteem, and empowerment. Many also listed team building, unity, and collaborative working relationships as key outcomes. In addition, outcomes such as developing cross-cultural understanding, acquiring insight into professional behaviors (after interacting with health professionals), and preparing for the world of work were mentioned. Teachers also noted that the learning extended beyond the classroom. Some observed students using new knowledge such as making healthier food choices for themselves. Others spoke of their students telling them that they had shared health related information with other learners, their families, and the wider community.

All of the teachers stated that skill development was an important outcome of the health projects. A few observed that students developed an increased appreciation for math, for example, after learning how cooking and nutrition were linked to arithmetic. Several emphasized increased information and skills related to science, computers, and technology. One teacher, however, added a cautionary note that a few students left with misconceptions of some health issues.

Overall, teachers reported that health activities greatly aided the teaching of reading, writing, vocabulary building, and speaking skills as well as GED preparation. A few teachers, however, felt that the health curriculum did not work well in GED classes because students were distracted from exam preparation. Teachers were also asked to rate the extent to which the health project helped them meet their overall curriculum goals. A six point scale was used with 1 indicating that the health project helped *to a limited extent* and 6 indicating that the project helped *to a great extent*. The average score for this item was 5.3, indicating that overall, teachers indicated that the health project helped them meet classroom objectives.

Additionally, teachers were asked to examine a list of skills and rate the extent to which the health project distracted from or enhanced the development of specific areas or skills. As **Table 2** illustrates, all the mean scores for teachers' ratings are in the high range, indicating that teachers felt the health project enhanced skill development in many important areas.

In addition, teachers noted that they highly valued health as a subject of

study because of its relevance to learners' lives. Many reported that learners or their families face critical health issues and that addressing these subjects in class provided a source of information and support. For example, several ESOL teachers reported that some learners were recent immigrants in need of information to access available health and social services. Teachers also reported that because of the personal relevance of health, learners were more interested and motivated to read or write on health issues and speak in class or at group presentations about the subject. Some teachers noted that learners could talk about health without any background training or information because health topics are familiar to many, encouraging involvement and participation. However, one teacher thought that health education had the potential of seeming too condescending because it could convey to adult students that they were not properly taking care of themselves. Overall, most educators highlighted the positive effects of using health as a topic of discussion and activity.

Teachers were also asked to compare health as a subject to other common topic areas, such as literature or history, and rate the extent to which the health project contributed to various areas or skills. As **Table 3** illustrates, all of the mean scores were above the mid-point. These data indicate that when compared to other topics, health projects were perceived as offering added value for the development of both "hard skills" such as reading, writing, and math, as well as "soft skills" such as speaking and presentation skills, dialogue and discussion. Teachers also noted that, compared to other subjects, health projects contribute more to learner participation, motivation and interest. However, two teachers commented that it was the method of teaching, particularly the participatory model, rather than the topic that made the project successful. They thought that students could learn much from most any topic, including health, if a participatory method was used.

Conclusions and Implications

Adult education teachers participating in this exploratory study indicated that their classroom work related to health topics included a focus on a number of skill areas such as reading, writing, vocabulary, and language. Furthermore, all of the teachers interviewed stated that skill development was an important outcome of the health projects. A majority of the teachers identified student motivation, confidence, self-esteem, and empowerment among the outcomes of the health project and more than half of the teachers mentioned team building, unity, and collaborative working relationships as key outcomes as well. Many teachers noted increased activity within the community and reported students taking healthful action for themselves.

Study participants were asked to review the research team's initial findings and offer feedback. Seventeen of the thirty-one teachers interviewed provided reflections after reviewing the initial findings. These teachers recommended that additional issues be explored in further research. These include an examination of barriers to incorporating health in the curriculum, an examination of the contribution a health focus makes in stimulating community involvement, and concrete comparisons between health as a topic of focus and other possible content areas of interest to adults.

Within the field of public health, adult learning centers have not traditionally been noted as a site for health education. However, such centers provide an important venue for health education efforts because they serve members of population groups often described as at risk and "hard to reach" and because such centers offer opportunities, through adult learning classes, for in-depth study and discussion of health issues of critical importance to adults. The introduction of health topics into adult learning centers would best be served by a partnership between health educators and adult educators. Such a partnership must acknowledge and respect the teachers' primary mission within the educational setting. This exploratory study indicates that health as a subject area provides a vehicle for teaching basic skills; for engaging adult learners in writing, research, and discussions; and for supporting health promoting change.

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Table 1.
Mean ratings of 31 participating teachers reporting the extent to which health projects concentrated on specified areas/skills. A *rating of 1* indicates that *no time at all* was spent on the skills and a *rating of 6* indicates that *a good deal of time* was spent.*

Area / Skill	Rating
Dialogue and discussion	5.5
English language listening skills	4.7
English language speaking skills	4.3
Critical thinking skills	4.3
Vocabulary building	4.2
Reading	4.1
Presentation skills	3.9
Story writing	3.4
Research skills	3.1
Note taking	3.0
Interview skills	2.9

*Rating:
no time at all 1 2 3 4 5 6 a good deal of time

Table 2.

Mean ratings of 31 participating teachers reporting the extent to which health projects enhanced or distracted from specified areas/skills. A *rating of 1* indicates that the health project *distracted from* skill building and a *rating of 6* indicates that the health project *enhanced* the area or skill.*

Area/ Skill	Rating
Dialogue and discussion	5.6
Vocabulary building	5.3
Language development skills	5.2
Critical thinking skills	5.2
Presentations skills	5.1
Research skills	5.0
Story writing	5.0
Reading	5.0
Interview skills	4.7
Essay writing	4.2
Note taking	4.1

*Rating:

Health project distracted from 1 2 3 4 5 6 Health project enhanced

Table 3.

Mean rating of 31 participating teachers reporting the extent to which the health project contributed to a specific area/ skill when compared to other subjects. A *rating of 1* indicates that the health project *contributed no more or less than* other topics to the specific area/skill and a *rating of 6* indicates that the health project *contributed a good deal more than* other topics.*

Area/ Skill	Rating
Learner participation	5.3
Learner motivation	5.0
Class friendship bonds	5.0
Learner interests	4.8
Retention	4.6
Community involvement	4.6
Civic participation	4.0
Attendance	3.6
Job Preparation	3.5

*Rating:

No more or less than other (non health) topics 1 2 3 4 5 6 A good deal more than other (non health) topics

NCSALL

National Center for the Study of Adult Learning and Literacy

The Mission of NCSALL

The National Center for the Study of Adult Learning and Literacy (NCSALL) will pursue basic and applied research in the field of adult basic education, build partnerships between researchers and practitioners, disseminate research and best practices to practitioners, scholars and policymakers, and work with the field to develop a comprehensive research agenda.

NCSALL is a collaborative effort between the Harvard Graduate School of Education and World Education. The Center for Literacy Sturdies at The University of Tennessee, Rutgers University, and Portland State University are NCSALL's partners. NCSALL is funded by the U.S. Department of Education through its Office of Educational Research and Improvement (OERI) and OERI's National Institute for Postsecondary Education, Libraries, and Lifelong Learning.

NCSALL's Research Projects

The goal of NCSALL's research is to provide information that is used to improve practice in programs that offer adult basic education, English to Speakers of Other Languages, and adult secondary education services. In pursuit of this goal, NCSALL has undertaken research projects in four areas: (1) learner motivation, (2) classroom practice and the teaching/learning interaction, (3) staff development, and (4) assessment.

Dissemination Initiative

NCSALL's dissemination initiative focuses on ensuring that the results of research reach practitioners, administrators, policymakers, and scholars of adult education. NCSALL publishes a quarterly magazine entitled *Focus on Basics*; an annual scholarly review of major issues, current research and best practices entitled *Review of Adult Learning and Literacy*; and periodic research reports and articles entitled *NCSALL Reports*. In addition, NCSALL sponsors the Practitioner Dissemination and Research Network, designed to link practitioners and researchers and to help practitioners apply findings from research in their classrooms and programs. NCSALL also has a web site:
http://hugse1.harvard.edu/~ncsall

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Reports

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1. Merrifield, J. (1998). *Contested Ground: Performance and Accountability in Adult Education.*
2. Purcell-Gates, V., Degener, S., & Jacobson, E. (1998). *Adult Literacy Program Practice: A Typology Across Dimensions of Life-Contextualized/Decontextualized and Dialogic/Monologic.*
3. Tyler, J., Murnane, R., & Willett, J. (in press). *The Economic Impact of the GED* (tentative title).
4. Bingman, M., Smith, C., & Stewart, K. (1998). *Practitioners Speak: Contributing to a Research Agenda for Adult Basic Education.*
5. Rudd, R., Zacharia, C., & Daube, K. (in press). *Integrating Health and Literacy: Adult Educators' Experiences.*
6. Beder, H. (in press). *The Outcomes and Impacts of Adult LiteracyEducation in the United States.*

Focus on Basics

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1. Vol. 1, Iss. A (Feb. 1997), *Research.*
2. Vol. 1, Iss. B (May 1997), *Reading.*
3. Vol. 1, Iss. C (Sept. 1997), *Multilevel Classrooms.*
4. Vol. 1, Iss. D (Dec. 1997), *Content-Based Instruction.*
5. Vol. 2, Iss. A (Mar. 1998), *Learner Motivation.*
6. Vol. 2, Iss. B (June 1998), *The GED.*
7. Vol. 2, Iss. C (Sept. 1998), *Theory of Change.*

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